Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

032405 R168

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
-		· · · · · · · · · · · · · · · · · · ·	(Column 1)		·(Column 2)			TYPE		OR	OR SMALL ENTITY		
TOTAL CLAIMS			4					RATE	FEE].	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS					• 0			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			/ minus 3 =		0			X43=		OR	X86=	•	
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=		
* If the difference in column 1 is less than zero, ento					"0" in c	column 2	L	TOTAL		OR	TOTAL	7.70	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								OTHER THAN SMALL ENTITY OR SMALL ENTITY					
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=		OR	X86=		
L	FIRST PRESE	NTATION OF ME	JLTIPLE DE	PENDENT	CLAIM			+145=		OR	+290=		
								TOTAL		OR	TOTAL ADDIT, FEE		
		DDIT. FEE		•	ADDII. PEE								
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colum HIGHE NUME PREVIO PAID F	EST BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		= .		X43=		00	X86=		
٨	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR			
	•							+145=		OR	+290=	. •	
							TOTAL DDIT, FEE	• •	OR	TOTAL ADDIT. FEE			
		(Column 1)	(Column 3)			• • •		. •	·				
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	,	
	Independent	*	Minus	***		=		X43=		OR	X86=		
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=					
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=		
** !	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR ,	TOTAL ODIT. FEE		
		mber Previously Paid					r foun	d in the app	opriate box	in colu	ımn 1.		